

City of San Antonio

Development & Business Services Center

Fire Prevention Division

1901 S. Alamo St.

San Antonio, Texas 78204

Phone: (210) 207-8410

Fax: (210) 207-7949

OVERTIME REQUEST FORM

FROM: _____
(Name of Contractor)

(Physical Address)

CONTACT# : () _____ - _____ **FAX #:** () _____ - _____

JOB SITE: _____ **PERMIT #:** _____
(Business Name)

(Physical Address)

(Bldg. # / Suite #)

DUE TO THE ADVANCED STATUS OF CONSTRUCTION OF THE ABOVE
REFERENCED PROJECT, WE WOULD LIKE TO REQUEST OVERTIME FOR:

☐ PLAN REVIEW ☐ INSPECTION ☐ TEST

DATE: _____ TIME: _____ ☐ AM ☐ PM

WE UNDERSTAND THAT OVERTIME CHARGE WILL BE AT THE RATE
OF **\$61.80** PER HOUR WITH A **MINIMUM OF 2 HOURS**. ENCLOSED
IS A CHECK PAYABLE TO THE CITY OF SAN ANTONIO.

NOTE: *Inspectors overtime starts between 4:30PM - 5:30PM, "Mon.- Fri."*

SIGNATURE: _____ & (print) _____ (required)

ON-SITE CONTACT#: () _____ - _____